

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M-G		2/15/00
O.I.P.E. CLASSIFIER		15	2/15/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		100874	4-16-00

Best Available Copy
 — (Through number) 15

INDEX OF CLAIMS

Rejected	N	Non-elected
Allowed	I	Interference
Canceled	A	Appeal
Restricted	O	Objected

Claim	Date
Final	
Original	
1	8/4
2	8/14
3	8/14
4	8/14
5	8/14
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
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